10-11-05 PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: <u>Mail</u> Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 OCT 0 7 2005 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571) 273-2885 STRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where produce the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as noticated throws corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 08/04/2005 22120 EXPRESS MAIL LABEL ZAGORIN O'BRIEN GRAHAM LLP I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 7600B N. CAPITAL OF TEXAS HWY. **AUSTIN, TX 78731** (Depositor's name 10/12/2005 EAREGAY2 00000056 09888708 ~EV735338495 (Signature 1400.00 OP 01 FC:1501 02 FC:8001 9.00 OP APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/888,708 06/25/2001 Michael H. Perrott 026-0015 8814 TITLE OF INVENTION: METHOD AND APPARATUS FOR BIT ERROR RATE DETECTION APPLN, TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$1400 11/04/2005 **EXAMINER** ART UNIT CLASS-SUBCLASS LAMARRE, GUY J 714-704000 2133 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list ZAGORIN O'BRIEN (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, GRAHAM LLP Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to XX "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is listed, no name will be printed. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Silicon Laboratorios Anatin

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